



Reportable Events And Notification Procedures Provider Quick Reference

VERBAL NOTIFICATION PROCEDURES:

Reportable incident events listed below involving a Delaware child/youth **require** an initial report to the parents/guardians and the assigned clinical services team. *NOTE: Contact the child's/youth's Clinical Services Team during business hours or call (800) 722-7710 in DE or outside of DE.*

After hours, weekends and holidays, call (800) 969-HELP (4357).

EVENTS REQUIRING IMMEDIATE PERSON-TO-PERSON VOICE CONTACT (VOICE MAIL NOT ACCEPTABLE) WITH CLINICAL SERVICES TEAM	EVENTS FOR WHICH VOICE MAIL MESSAGES ARE ACCEPTABLE
(MUST BE REPORTED WITHIN 4 HOURS)	(MUST BE REPORTED WITHIN 24 HOURS OF THE EVENT)
☎ Allegation of institutional abuse of a Delaware child by program staff member(s)	☑ Arrest of an employee for criminal offenses occurring at the program site or involving a Delaware child
☎ Alleged sexual assault or rape of or by a Delaware child ☎ Child/youth death or death of a program staff member while on duty ☎ Escape, AWOL or runaway from any 24-hour facility, foster care, or day treatment program	☑ Communicable disease of any child or staff in program (e.g., tuberculosis, hepatitis, meningitis) ☑ Community, facility, or employee issues which may or may not relate directly to any Delaware child but could lead to media attention or inquiries (e.g., employee strike, protests about program location)
☎ Injury, illness or event requiring medical or psychiatric hospital <u>admission</u> beyond emergency room	☑ Contraband (e.g., weapons, drugs, and other illegal or dangerous items)
☎ Disturbance that has the potential for harming a child or causing major program disruption such as a natural disaster, bomb threat, hostage taking, etc. ☎ Abduction of youth	☑ Infection/illness that may have been caused by conditions in the program facility ☑ Injury or illness that results in emergency room visit or requires outside medical attention ☑ Medication errors/lapses ☑ Pattern of self-harm ☑ Police called for assistance with youth or youth arrested on new delinquency charges ☑ Removal of employee from duty as a result of a performance issue that may affect security or child safety (i.e., intoxication or drug use while on duty, etc.) ☑ Restraint (specify restraint type: Physical, Chemical, or Mechanical) ☑ Injury resulting from physical restraint ☑ Seclusion ☑ Suicide attempt ☑ Vehicle accident involving DSCYF client (child or family member) in a provider vehicle ☑ Physical peer to peer aggression

VERBAL NOTIFICATION PROCEDURES TO PROGRAM ADMINISTRATOR ONLY:

ALTHOUGH NO DELAWARE CHILD MAY BE INVOLVED, INCIDENTS IN THIS CATEGORY ARE TO BE REPORTED TO THE PROGRAM ADMINISTRATOR only NO LATER THAN THE NEXT BUSINESS DAY (VOICE MAIL MESSAGES ARE ACCEPTABLE)

- ❶ Allegation of institutional abuse lodged against provider's staff but not involving a Delaware child
- ❷ Allegation of abuse/neglect by persons outside the agency (parent, etc.)
- ❸ Arrest of provider staff for violent felonies against person(s) occurring away from the program site
- ❹ Charges of DUI of a provider staff member with responsibility for transporting children



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INFORMATION TO BE INCLUDED IN THE INITIAL TELEPHONE NOTIFICATION:

- Reporting person's name, job title and phone number
- Provider/Program name, and phone number
- Child/Adolescent name(s) and date(s) of birth
- Date, location and time of event
- Description of event-what happened? Include who, what, how, why, and any available information such as situations existing before the incident, recent changes, attitudes, other contributing factors, etc
- What steps or precautions have been taken to re-establish safety or manage the situation? If the incident involved allegations of abuse, what steps have you taken to ensure child safety?
- Current condition of the child(ren) now?
- Who has been contacted? (Parents? Guardians? Other agencies?)
- Who should DPBHS contact for additional information and/or follow-up (name and phone number)?
- ****Note: If more than one incident occurred, please indicate the order of occurrence.***

WRITTEN NOTIFICATION PROCEDURES:

A completed Incident Report is due 72 hours after the reportable event for **ALL** incident reports. Refer to the current State Fiscal Year's DSCYF Operating Guidelines for the new standardized report form. Please download and type form to ensure the report is legible. Be sure that the form is clear, complete and includes all notifications prior to submission.

The report should be faxed to DPBHS Quality Assurance/Quality Improvement Unit at (302) 661-7270.

The fax is secured and available 24 hours 7days a week. If you have any questions, please contact the QA/QI unit at (302) 633-2738 or (302) 633-2681.